UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

	Plaintiff(s),	Case No.:			
v.		MOTION FOR LE PRO HAC VICE	AVE TO APPEAR		
	Defendant(s).				
	eyey of the United States District C				
captioned case	e for the purposes of representi	ng the following party (or p	arties):		
with the Rules of Evide Court, and this I under District of Ore	State Bar; and 2) the sence, the Federal Rules of Civil Statement of Professions and that my admission to the egon is solely for the purpose of the conclusion of the matter	nat I have read and am familal and Criminal Procedure, the onalism. Bar of the United States Deficient on the above materials.	iar with the Federal he Local Rules of this istrict Court for the		
(1)	PERSONAL DATA:				
	Name:	(First Name)			
	City:				
	Phone number:	Fax numb	Fax number:		
	Business e-mail address:				

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(2)	(2) BAR ADMISSION INFORMATION:				
	(a)	State bar admission(s), date(s) of admission, and bar number(s):			
	(b)	Other federal court admission(s) and date(s) of admission:			
(3)	CERTIFICATION OF DISCIPLINARY ACTIONS:				
	I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions.				
	I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)				
(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.				
(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.				
		rney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the 3-3, and I certify that the above information is true and correct.			
DATED):				
		(Signature)			

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REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for *pro hac vice* admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1.

To request a waiver of the requireme following box:	nt to associate with local co	unsel under LR 45-1	, check the
☐ I seek admission for the limit Court did not issue. Pursuant requirement to associate with from local counsel with this a	to LR 45-1(b), I request a v local counsel and therefore	vaiver of the LR 83-	3(a)(1)
To associate with local counsel, provobtain the signature of local counsel.	_	on about local couns	el, and
Name: (Last Name)			
(Last Name) OSB number:		(MI)	(Suffix)
Agency/firm affiliation:			
Mailing address:			
City:	State:Z	Zip:	
Phone number:	Fax number:		
Business e-mail address:			
CERTIFICATION OF ASSOCIAT	ΓE LOCAL COUNSEL:		
I certify that I am a member in good understand the requirements of LR 8 number	3-3, and that I will serve as a		
DATED:			
	<u>Lydia And</u> (Signature of Local C	derson-Dana	
	(Signature of Local C	ounsel)	

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